Initials\*

Foreign Document No

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Substitute for form 1449A/PTO INFORMATION DISCLOSURE	Complete if Known		
STATEMENT BY APPLICANT (Use as many sheets as necessary)	Application Number	10/735,289	
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Sheet 1 of 1	Attorney Docket No: 1676.011US1		

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Examiner Initials*	Cite No 1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T²		
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EXAMINER	/Fozia Hamud/	DATE CONSIDERED	05/03/2008
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